

NAME OF PARTY OR ATTORNEY: ADDRESS WHERE YOU WANT MAIL SENT: TELEPHONE NUMBER <i>(Optional)</i> : ATTORNEY FOR <i>(Name)</i> :	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
PERSON SEEKING ORDER: PERSON TO BE RESTRAINED:	
APPLICATION AND DECLARATION FOR ORDER (Domestic Violence)	CASE NUMBER:

(THIS IS NOT AN ORDER)

Read the Instructions for Obtaining Orders Prohibiting Domestic Violence before completing this form. This form must be completed and filed with an Order to Show Cause and Temporary Restraining Order (CLETS) (Form 1296.10).

1. PERSONS TO BE PROTECTED *(List names and ages of all persons **including yourself**, if applicable, to be protected by this order and their relationship to the party seeking the orders):*

2. PERSON TO BE RESTRAINED *(Name)*: _____

Sex: ☐ M ☐ F Ht.: _____ Wt.: _____ Hair Color: _____ Eye Color: _____ Race: _____ Age: _____ Date of Birth: _____

3. ☐ I have been involved in other court actions with the restrained person in which restraining orders were issued. *(If known, please specify case numbers and county, and attach copies of orders):*

4. I am applying for a restraining order and the person to be restrained and I *(check at least one box)*:

- a. ☐ are married and a dissolution, legal separation, or annulment proceeding
(1) ☐ is not pending. Date of marriage: _____
(2) ☐ is pending. *(If known, specify case no. and county):*
- b. ☐ were formerly married to each other. *(Specify state, county, and date of dissolution):*
- c. ☐ are related to each other by blood, marriage, or adoption. *(Specify relationship):*
- d. ☐ live together.
- e. ☐ formerly lived together.
- f. ☐ have had a dating or engagement relationship.
- g. ☐ are parents of a minor child together.
- h. ☐ are parents of a minor child together and an action to establish paternity has been or is being filed. *(If known, specify case no. and county):*

5. The person to be restrained has *(check at least one)*:

- a. ☐ assaulted or attempted to assault me or another member of my household.
- b. ☐ caused, threatened, or attempted bodily injury to me or another member of my household.
- c. ☐ made me or another member of my household afraid of physical or emotional harm.
- d. ☐ sexually assaulted or attempted to sexually assault me or another member of my household.
- e. ☐ stalked me.
- f. ☐ other *(describe in item 20)*.

(Continued on reverse)

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6. a. The person to be restrained and I (you must check (1) or (2) below):

- (1) ☐ have no minor children together.
- (2) ☐ have minor children together ☐ who are juvenile court dependents. (If known, specify case nos.):
- ☐ A juvenile dependency petition has been filed.

Child's first and last name and birth date

b. If you are seeking an order regarding custody or visitation of your children, you must complete the following.

- (1) ☐ Each child listed above is currently living with me and/or the person to be restrained in the following count(ies) (specify):
- (2) ☐ Each child has lived with me or the person to be restrained in the State of California during the past five (5) years.
- (3) ☐ I have not participated in any litigation or proceedings in any state concerning custody of any child listed above.
- (4) ☐ I have no information of any pending custody proceeding or of any person not a party to this proceeding who has physical custody or claims to have custody or visitation rights concerning any child listed above.

If you were unable to check each box for statement 6b(1)-(4) above, you must attach a Declaration Under Uniform Child Custody Jurisdiction Act (UCCJA) (Form MC-150).

- (5) ☐ I have attached a completed Declaration Under Uniform Child Custody Jurisdiction Act (UCCJA) (MC-150).

I REQUEST THE COURT TO MAKE THE ORDERS INDICATED BY THE CHECK MARKS IN THE BOXES BELOW.

7. ☐ **RESTRAINING ORDERS** ☐ **To be ordered now and effective until the hearing.**
 Restrained person must not contact, molest, harass, attack, strike, threaten, sexually assault, batter, telephone, send any messages to, follow, stalk, destroy my personal property, or disturb my peace
☐ and that of the protected persons listed in item 1.

8. ☐ **RESIDENCE EXCLUSION ORDERS** ☐ **To be ordered now and effective until the hearing.**
 I am entitled to live at the address below because (specify facts):

Restrained person must immediately move from and must not return to (address):

and may take only personal clothing and effects needed until the hearing.

9. ☐ **STAY-AWAY ORDERS** ☐ **To be ordered now and effective until the hearing.**
 Restrained person must stay at least (specify): _____ yards away from the following persons and places:
 (The addresses are optional and you do not have to provide them.)
- a. ☐ Myself
- b. ☐ The protected persons listed in item 1
- c. ☐ My residence (address optional):
- d. ☐ My place of work (address optional):
- e. ☐ The children's school or place of child care (address optional):
- f. ☐ The protected vehicle number (specify year, make, model, and license plate #):
- g. ☐ Other (specify):

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10. Will granting any of the stay-away orders in item 9 prevent the restrained person from getting to that person's residence, school, place of employment, or place of worship? ☐ Yes ☐ No (If yes, explain):

11. ☐ **CHILD CUSTODY AND VISITATION** ☐ To be ordered now and effective until the hearing.

a. ☐ **Custody**

I request custody orders as follows:

Child's name

Custody to (name)

Child's name

Custody to (name)

b. ☐ **Visitation**

I request that the restrained person have the following temporary visitation rights:

(1) ☐ No visitation ☐ until the hearing ☐ after the hearing

(2) ☐ Supervised visitation after the hearing

(3) ☐ The following specific visitation schedule:

12. ☐ **REMOVAL OF CHILD**

I request that the restrained person shall not be allowed to remove the children from:

a. ☐ the State of California.

b. ☐ the County of (specify):

c. ☐ other (specify):

(If you requested an order for child support, attorney fees, or costs, attach a completed Financial Statement (Simplified) (Form 1285.52) or an Income and Expense Declaration (Form 1285.50).)

13. ☐ **CHILD SUPPORT**

a. ☐ I am receiving or have applied for public assistance.

b. ☐ I am requesting child support under the child support guidelines for the following children:

Child's name and birth date

14. ☐ **PROPERTY CONTROL**

☐ To be ordered now and effective until the hearing.

a. I request that I be given the exclusive temporary use, possession, and control of the following property we own or are buying (specify):

b. I request that the restrained person be ordered to make the following payments on debts coming due while the order is in effect:

Debt

Amount of payment

Pay to

c. This order is necessary because (specify):

(Continued on reverse)

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15. ☐ **ATTORNEY FEES AND COSTS**

I request that my attorney fees and costs be paid by the restrained person as follows:

16. ☐ **RESTITUTION**

I request that the restrained person be ordered to pay the following lost earnings and other actual expenses or costs of services caused directly by the conduct alleged in this application:

Type of loss

Pay to

Amount of claim

17. ☐ **COUNSELING**

I request that the restrained person participate in a certified batterer's program.

18. I request that copies of orders be given to the following law enforcement agencies:

Law enforcement agency

Address

19. ☐ **I request that time for service of the Order to Show Cause and accompanying papers be shortened so that they may be served no less than (specify number): _____ days before the date set for the hearing.** I need to have the order shortening time because of the facts contained in this application. *(Add additional facts if necessary):*

20. ☐ **DESCRIPTION OF CONDUCT**

- a. Describe in detail the most recent incidents of abuse. State what happened, the dates, and who did what to whom. Describe any injuries.

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b. Describe any history of abuse.

☐ Continued on other side.

21. ☐ **OTHER ORDERS** (specify other orders you request to help carry out the orders previously requested):

22. ☐ I request a court order waiving the fees payable to a law enforcement agency for serving restraining orders on the restrained person. (If you wish to ask the court to waive the fees payable to law enforcement, you must complete and file with this application an Application for Waiver of Court Fees and Costs (Form 982(a)(17)).)

PLEASE NOTE THAT ALL ORDERS ISSUED BY THE COURT MUST BE PERSONALLY SERVED ON THE RESTRAINED PERSON. NO PERSON TO BE PROTECTED, INCLUDING YOURSELF, MAY PERSONALLY SERVE THE REQUIRED ORDER ON THE RESTRAINED PERSON.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

.....
(TYPE OR PRINT NAME)


(SIGNATURE OF PARTY SEEKING RESTRAINING ORDER)